

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

ENCLOSURES (check all that apply)

- | <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment / Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)

<input type="checkbox"/> Extension of Time Request

<input type="checkbox"/> Express Abandonment Request

<input type="checkbox"/> Information Disclosure Statement

<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Reply to Missing Parts/
Incomplete Application
<input type="checkbox"/> Reply to Missing Parts
under 37 CFR1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition

<input type="checkbox"/> Petition to Convert to a
Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) ____
<input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Appeal Communication to Board
of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information

<input type="checkbox"/> Status Letter

<input checked="" type="checkbox"/> Other Enclosure(s)
<i>(please identify below):</i>
Request to Amend Attorney Docket
Number | | |
|--|---|---|---------|--|
| <table border="1"> <thead> <tr> <th>Remarks</th> </tr> </thead> <tbody> <tr> <td> </td> </tr> </tbody> </table> | | | Remarks | |
| Remarks | | | | |
| | | | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm

Davis Wright Tremaine LLP

Signature _____

/Brian L. Johnson/

Printed Name

Brian L. Johnson

Date _____

April 7, 2006

Reg
No.

40,033

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature _____

Via Electronic Submission 04/04/2006

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Date _____

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